

03500.017666



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: Unassigned
TAKAHARU KONDO, ET AL.)	
	:	Group Art Unit: Unassigned
Application No.: 10/693,914)	
	:	
Filed: October 28, 2003)	
	:	
For: ZINC OXIDE FILM,)	
PHOTOVOLTAIC DEVICE MAKING	:	
USE OF THE SAME, AND ZINC)	
OXIDE FILM FORMATION	:	
PROCESS)	May 14, 2004

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Sir:

Preliminary to examination, please amend the above-identified application, as follows:



IPW

In re Application of:

Docket No. 03500.017666

TAKAHARU KONDO, ET AL.

Application No.: 10/693,914

Examiner: Unassigned

Filed: October 28, 2003

Group Art Unit: Unassigned

For: ZINC OXIDE FILM, PHOTOVOLTAIC DEVICE
MAKING USE OF THE SAME, AND ZINC OXIDE
FILM FORMATION PROCESS

Date: May 14, 2004

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Preliminary Amendment and an Information Disclosure Statement in the above-identified application.

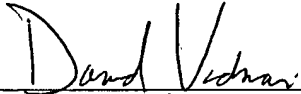
☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	21	MINUS	21	= 0	x \$9 \$18	\$ 0.00
INDEP. CLAIMS	5	MINUS	5	= 0	x \$43 \$86	\$ 0.00
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$ 0.00

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicants
Damond E. Vadnais
Registration No. 52,310

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DEV/vc